

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813 or P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: (808) 587-0460 FAX: (808) 587-0470

email: ethics@hawaiiethics.org Web site: www.hawaii.gov/ethics

NOTE: This is a public document.

THIS SPACE FOR	OFFICE	USE	ONLY
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LOBBYIST REGISTRATION FORM

	(Type of t	Fillit Oleany)	STATE OF HAWAU
PART I LOBBYIST		S	TATE ETHICS COMMISSION
NAME (Last)	(First)	(Middle)	TELEPHONE
Toyofuku	Robert	S .	808-524-4155
MAILING ADDRESS (Street)			FAX 808-524-0573
1000 Bishop St., #503		·	EMAIL toyofuku@hiadvocates.com
(City)	(State)	,	(Zip Code)
Honolulu	HI	•	96813
EMPLOYING ORGANIZATION (Fill in only if you	are employed by a business er	ntity which has been retained to lobby)	TELEPHONE
BT Consulting, Inc. dba Advoca	ites		same
MAILING ADDRESS (Street)			FAX
same			EMAIL
(City)	(State)		(Zip Code)
•			,

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Hawaiian Humane Society		TELEPHONE	
		808-946-21 9 7 x 202	
MAILING ADDRESS (Street)	. •	FAX 808-955-6034	
2700 Waialae Ave.	Pb	EMAIL UCOS @hawaiianhumane.org	
(City)	(State)	(Zip Code)	
Honolulu	HI ·	96826	
NAME OF PERSON RESPONSIBLE FOI	R PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE	
Pamela Burns		same	
MAILING ADDRESS (Street)		FAX	
same	•	EMAIL	
		same	
(City)	(State)	(Zip Code)	

Agriculture	ation	Human Services	Science, Technology & Economic Development
Communications & Government Gover	mment Operation & ace	Intergovernmental R	elations,
Consumer Protection &	iian Affairs	Labor & Employmen	☐ Transportation
Culture, Arts, Historic Health	n	Planning, Land & Wa Use Management	ter Other: (indicate below)
Ecology, Energy Environmental Protection Housi	ing	Public Safety & Corre	ections
RT IV CERTIFICATION OF LOS		·	· · · · · · · · · · · · · · · · · · ·
I hereby certify that the information	on furnished abov	ve is, to the best of my	knowledge, correct and complete.
Para ()	e of let		1/30/13
(Signature	of Lobbyist		(Date)
RT V AUTHORIZATION TO LO	BBY		
ME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED		
amela Burns	President		
ME OF ORGANIZATION (if applicable)			TELEPHONE
awaiian Humane Society		,	808-946-2197 x 202
LING ADDRESS (Street)			FAX same
700 Waialae Ave.			EMAIL same
	(State)		(Zip Code)
(City)	HI		96826
	•		, <u>-</u>

(Signature of Authorizing Officer or Person Represented)

(Date)